Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>5-7-2010</u>	Address:	Madison PD Firing Range
Case #:	<u>42F30519</u>		Hannah Dr, Madison, IN
County:	<u>Jefferson</u>		
Type of Laboratory Seizure (check one)		Seizure Location (check all that apply)	
 ☑ Operational Lab ☐ Chemical/Glassware/Equipment (only) ☐ Dumpsite (only) 		☐ Residence ☐ Outbuilding ☐ Vehicle	☐ Hotel/Motel ☐ Open — No Structure ☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents:			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid:			
Corrosive Base:			
Other (item and location):			
☐ Yes _ ⊠ No	er age 18 discovered (check one) (number present) eport to Child Protective Services	Ephedrin	<u>e Information</u> e/Pseudoephedrine Tracking Log erchant Tip —
This report is to be faxed to the following agencies that serve the location:			
Fire Depart	ment: Madison FD	Fax: <u>N/A</u> Fax: <u>812.273.1955</u> Fax: <u>N/A</u>	
Health Dep	eartment: Jefferson Co		
Child Prote	ection Service: <u>N/A</u>		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: K. Smith Phone 812.246.5424			

- This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.
- *** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.